



Linda McCulloch, Superintendent
Office of Public Instruction
PO Box 202501
Helena, MT 59620-2501

**School District Claim for
State Reimbursement for
Individual and Isolated Transportation**

State ☐
District ☐
County ☐

DUE DATES:	First Semester	Second Semester
	February 1 to County Superintendent February 15 to State Superintendent	May 10 to County Superintendent May 24 to State Superintendent
COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION:		

This claim is for the period beginning _____, 20____ and ending _____, 20____.
month day month day

CERTIFICATION:

The information on this form is complete and accurate to the best of my knowledge.

Date		Signature, Chair, Board of Trustees			
County:		District:		District Level:	
14 Fergus		0258 Lewistown Elem		Elementary	
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
1	1252	No	Collins, Jennifer L	1.15	



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Date			Signature, Chair, Board of Trustees			
County: 14 Fergus			District: 0264 Deerfield Elem		District Level: Elementary	
District #	Contract #	Shared	Family's Name		Daily Rate	# of Days Transported
15	1278	No	Lucas, Lisa		0.50	



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Date			Signature, Chair, Board of Trustees		
County: 14 Fergus			District: 0268 Grass Range Elem		District Level: Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
27	1279	Yes	Descheemaeker, Paul	0.55	_____
27	1281	Yes	McKay, Kaylene	2.00	_____
27	1282	No	Smith, Jill	1.15	_____
27	1502	No	Livingston, Diane R	0.25	_____



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Date		Signature, Chair, Board of Trustees			
County:		District:		District Level:	
14 Fergus		0269 Grass Range H S		High School	
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
27	1279	Yes	Descheemaeker, Paul	0.55	_____
27	1280	No	Matovich, Karen	2.00	_____
27	1281	Yes	McKay, Kaylene	2.00	_____



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Date			Signature, Chair, Board of Trustees			
County: 14 Fergus			District: 0274 Moore H S		District Level: High School	
District #	Contract #	Shared	Family's Name		Daily Rate	# of Days Transported
44	1283	No	Clark, Steve		1.50	



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Date			Signature, Chair, Board of Trustees		
County: 14 Fergus			District: 0280 Roy K-12 Schools		District Level: High School
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
74	1284	No	Keller, Gary	1.00	_____
74	1285	No	Knerr, Jill	0.25	_____
74	1286	No	Knerr, Kristi	0.25	_____
74	1287	No	Petranek, David	1.00	_____
74	1288	No	Welch, Dean	0.50	_____
74	1289	No	Whitney, Cathy	0.25	_____
74	1290	No	Wright, Carmel	3.10	_____



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Date			Signature, Chair, Board of Trustees			
County: 14 Fergus			District: 0281 Denton Elem		District Level: Elementary	
District #	Contract #	Shared	Family's Name		Daily Rate	# of Days Transported
84	1255	Yes	Leininger, William		2.25	



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Date			Signature, Chair, Board of Trustees			
County: 14 Fergus			District: 0282 Denton H S		District Level: High School	
District #	Contract #	Shared	Family's Name		Daily Rate	# of Days Transported
84	1255	Yes	Leininger, William		2.25	



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County: 14 Fergus			District: 0291 Winifred K-12 Schools		District Level: High School
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
115	1291	No	Bold, Annette	1.25	_____
115	1292	No	Boyce, Dan	3.25	_____
115	1293	No	Knox, Karla	1.50	_____
115	1294	No	Elness, Mauri	1.00	_____
115	1295	No	Schmitt, Mike	0.25	_____



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County: 14 Fergus			District: 1218 Ayers Elem		District Level: Elementary	
District #	Contract #	Shared	Family's Name		Daily Rate	# of Days Transported
222	1296	No	Stahl, Frank		3.00	